



## APPLICATION DATA SHEET

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### Application Information

Application Number:	10/563,791
Filing Date::	01/06/2006
International Filing Date::	07/07/2004
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	No
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	No
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	Reusable Fluid Dispenser
Attorney Docket Number::	BFETH-1036832
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	24
Total Drawing Sheets::	15
Small Entity?::	Yes
Latin Name::	

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Variety Denomination Name::

Petition Included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

No

**Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Canada

Status::

Full Capacity

Given Name::

Anton

Middle Name::

Family Name::

Orlitzky

Name Suffix::

City of Residence::

Delta

State or Province of Residence::

British Columbia

Country of Residence::

Canada

Street of Mailing Address::

7388 Wilson Avenue

City of Mailing Address::

Delta

State or Province of Mailing Address::

British Columbia

Country of Mailing Address::

Canada

Postal or Zip Code of Mailing Address::

V4G 1H3

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Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Diana  
Middle Name::  
Family Name:: Lencar  
Name Suffix::  
City of Residence:: Calgary  
State or Province of Residence:: Alberta  
Country of Residence:: Canada  
Street of Mailing Address:: 102-4516 Valiant Drive NW  
City of Mailing Address:: Calgary  
State or Province of Mailing Address:: Alberta  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: T3A OY1

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Danny  
Middle Name::  
Family Name:: Sheremeta  
Name Suffix::  
City of Residence:: Delta

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State or Province of Residence:: British Columbia  
Country of Residence:: Canada  
Street of Mailing Address:: 7388 Wilson Avenues  
City of Mailing Address:: Delta  
State or Province of Mailing Address:: British Columbia  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: V4G 1H3

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Klaus  
Middle Name::  
Family Name:: Oehr  
Name Suffix::  
City of Residence:: Delta  
State or Province of Residence:: British Columbia  
Country of Residence:: Canada  
Street of Mailing Address:: 7388 Wilson Avenue  
City of Mailing Address:: Delta  
State or Province of Mailing Address:: British Columbia  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: V4G 1H3

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**Applicant Authority Type::**

**Inventor**

**Primary Citizenship Country::**

**Australia**

**Status::**

**Full Capacity**

**Given Name::**

**Colin**

**Middle Name::**

**Family Name::**

**Oloman**

**Name Suffix::**

**City of Residence::**

**Delta**

**State or Province of Residence::**

**British Columbia**

**Country of Residence::**

**Canada**

**Street of Mailing Address::**

**7388 Wilson Avenue**

**City of Mailing Address::**

**Delta**

**State or Province of Mailing Address::**

**British Columbia**

**Country of Mailing Address::**

**Canada**

**Postal or Zip Code of Mailing Address::**

**V4G 1H3**

**Correspondence Information**

**Correspondence Customer Number::**

**27111**

**Phone Number::**

**(415) 875-3266**

**Fax Number::**

**(415) 986-8054**

**Representative Information**

**Representative Customer Number::**

**27111**

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## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent filing Date::
This Application	claims priority to	60/484,657	07/07/2003

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

## Assignee Information

Assignee Name:: A.T.S. Electro-Lube Holdings Ltd.  
 Street of Mailing Address:: 7388 Wilson Avenue  
 City of Mailing Address:: Delta  
 State or Province of Mailing Address:: British Columbia  
 Country of Mailing Address:: Canada  
 Postal or Zip Code of Mailing Address:: V4G 1H3